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CALIFORNIA HIV SEROPREVALENCE ANNUAL REPORT 1999

California Department of Health Services
June 2001

DEPARTMENT OF HEALTH SERVICES

Gray Davis
Governor
State of California

Grantland Johnson
Secretary
Health and Human Services Agency

Diana M. Bontá, R.N., Dr. P.H.
Director
Department of Health Services

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY GRAY DAVIS, Governor

DEPARTMENT OF HEALTH SERVICES
OFFICE OF AIDS
611 NORTH SEVENTH STREET, SUITE A
SACRAMENTO, CA 95814-0208
(916) 445-0553

TO: INTERESTED PARTIES

SUBJECT: CALIFORNIA HIV SEROPREVALENCE ANNUAL REPORT, 1999

I am pleased to make available to you the California HIV Seroprevalence Annual Report. The data in this report were gathered in 1999 by the California Department of Health Services, Office of AIDS, in collaboration with local health departments, the Centers for Disease Control and Prevention, California blood banks and plasma centers, the United States Department of Defense, the California Department of Health Services, Genetic Disease Branch, and Viral and Rickettsial Disease Laboratory.

The data have been useful to many local health departments in monitoring the human immunodeficiency virus (HIV) epidemic locally, targeting prevention activities and other services, and making other public health policy decisions.

I hope you find the data useful in your local HIV serosurveillance activities as well as the community HIV prevention planning process. If you have any questions about this annual report, please contact Donna Zukowski or Juan D. Ruiz, M.D., Dr. P.H. at (916) 324-8441.

Vanessa Baird
for Michael Montgomery, Chief

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CALIFORNIA HIV SEROPREVALENCE ANNUAL REPORT 1999

Prepared by
Donna Zukowski
Juan Ruiz, M.D., Dr. P.H.

Office of AIDS
HIV/AIDS Epidemiology Branch
http://www.dhs.ca.gov/AIDS

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Kevin F. Reilly, D.V.M., M.P.V.M.
Acting Deputy Director
Prevention Services

Michael Montgomery, Chief
Office of AIDS

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TABLE OF CONTENTS

Glossary of Acronyms iv

Executive Summary v

Background and Highlights vi

Proposed Non-Name Based HIV Reporting System in California ix

Sexually Transmitted Disease Clinics 1

Blood Banks and Plasma Centers 42

Civilian Applicants for Military Service 46

Survey of Childbearing Women 51

TABLES AND GRAPHS

SURVEY OF CLIENTS ATTENDING SEXUALLY TRANSMITTED DISEASE CLINICS

Table 1. By Region 4

Figure 1. By Region 5

Table 2. California Counties and Cities 6

Table 3. By Gender and Risk Behavior 7

Table 4. By Gender and Race/Ethnicity 8

Figure 2. By Gender and Race/Ethnicity 9

Table 5. By Gender and Age Group 10

Figure 3. By Gender and Age Group 11

Table 6. MSM, by Race/Ethnicity 12

Figure 4. MSM, by Race/Ethnicity 13

Table 7. MSM, by Age Group 14

Table 8. Heterosexual Males, by Race/Ethnicity 15

Table 9. Heterosexual Females, by Race/Ethnicity 16

TABLES OF CONTENTS (Continued)

Figure 5. Heterosexuals, by Gender and Race Ethnicity 17

Table 10. Heterosexual Males, by Age Group 18

Table 11. Heterosexual Females, by Age Group 19

Figure 6. Heterosexuals, by Gender and Age Group 20

Table 12. Fresno County, Risk Behavior, Race/Ethnicity, Age Group 21

Table 13. Kern County, Risk Behavior, Race/Ethnicity, Age Group 22

Table 14. Los Angeles County, Risk Behavior, Race/Ethnicity, Age Group 23

Table 15. Sacramento County, Risk Behavior, Race/Ethnicity, Age Group 24

Table 16. San Bernardino County, Risk Behavior, Race/Ethnicity, Age Group 25

Table 17. San Diego County, Risk Behavior, Race/Ethnicity, Age Group 26

Table 18. San Francisco County, Risk Behavior, Race/Ethnicity, Age Group 27

Table 19. San Joaquin County, Risk Behavior, Race/Ethnicity, Age Group 28

Table 20. Santa Clara County, Risk Behavior, Race/Ethnicity, Age Group 29

Table 21. Long Beach City, Risk Behavior, Race/Ethnicity, Age Group 30

Table 22. Berkeley City, Risk Behavior, Race/Ethnicity, Age Group 31

Figure 7. Trends, San Francisco Region, Race/Ethnicity, Age Group, Risk Behavior,1994-1998 34

Figure 8. Trends, San Diego Region, Race/Ethnicity, Age Group, Risk Behavior, 1992-1998 35

Figure 9. Trends, Los Angeles Region, Race/Ethnicity, Age Group, Risk Behavior, 1992-1998 36

TABLES OF CONTENTS (Continued)

Figure 10. Trends, Central Coast Region, Race/Ethnicity, Age Group, Risk Behavior, 1992-1998 37

Figure 11. Trends, Bay Area Region, Race/Ethnicity, Age Group, Risk Behavior, 1992-1998 38

Figure 12. Trends, Central Valley Region, Race/Ethnicity, Age Group, Risk Behavior, 1992-1998 39

Figure 13. Trends, North Valley Region, Race/Ethnicity, Age Group, Risk Behavior, 1992-1998 40

Figure 14. Trends, South Valley Region, Race/Ethnicity, Age Group, Risk Behavior, 1992-1998 41

BLOOD BANKS AND PLASMA CENTERS

Table 23. Selected California Blood Banks 44

Table 24. Selected California Plasma Centers 45

CIVILIAN APPLICANTS FOR MILITARY SERVICE

Table 25. Selected California Counties 48

Table 26. Male Applicants, by Age Group and Race/Ethnicity 49

Table 27. Female Applicants, by Age Group and Race/Ethnicity 50

SURVEY OF CHILDBEARING WOMEN

Table 28. Selected California Counties and Cities 53

Table 29. By Age Group and Race/Ethnicity of Mother 54

GLOSSARY OF ACRONYMS

ELISA	Enzyme-Linked Immunosorbent Assay
CDC	Centers for Disease Control and Prevention
DTC	Drug Treatment Center
HFS	HIV Family of Surveys
HIV	Human Immunodeficiency Virus
IDU	Injection Drug Use
IFA	Immunofluorescence Assay
MSM	Men who have Sex with Men
STD	Sexually Transmitted Diseases

CALIFORNIA HIV SEROPREVALENCE ANNUAL REPORT, 1999

I. EXECUTIVE SUMMARY

Objectives. The objectives of this project were: 1) to establish baseline HIV seroprevalence rates, and 2) to monitor HIV trends in known high-risk or cross-over groups.

Design. The serosurvey uses anonymous, unlinked (blinded) HIV testing. Blinded samples are gathered from discarded blood originally collected from consecutive eligible clients for routine diagnostic purposes and tested for HIV antibodies after all personal identifying information has been removed.

Result. During 1999, there were a total of 17,620 serum samples tested from clients attending Sexually Transmitted Diseases (STD) clinics, of which 601 (3.4%) were HIV antibody positive. Among risk categories, the highest HIV seroprevalence (27.0 %) was among men who reported sex with men who also injected drugs. Among racial/ethnic groups, prevalence was highest among White men (9.9%) and Black women (0.6%). Almost 28% (158/575) of all HIV-infected men was in age group 35-39, accounting for the highest prevalence of 9.8%. Age group 40-44 represented 16% (4/25) of all HIV-infected women, showing the highest prevalence of 0.9%. The highest HIV seroprevalences among clients attending STD clinics were reported from the counties of San Francisco and San Diego.

Conclusion. The anonymous seroprevalence survey among clients attending STD clinics has provided a basis for further describing the HIV epidemic among populations at greatest risk for HIV infection in selected areas of California.

CALIFORNIA HIV SEROPREVALENCE ANNUAL REPORT 1999

Background

Between 1988 and 1996, the California Department of Health Services, Office of AIDS (CDHS/OA) participated in Human Immunodeficiency Virus (HIV) Family of Surveys (HFS) funded by the Centers for Disease Control and Prevention (CDC). The CDHS/OA has funded sentinel serosurveillance activities from 1997 to the present. The objectives of sentinel serosurveillance are to: 1) provide state and local health officials and the general public with information on HIV prevalence in various populations, so that education and prevention programs can be developed, targeted, and evaluated; 2) indicate the magnitude and extent of HIV infection by demographic and behavioral subgroup and by geographic area; 3) indicate regional and national changes over time in the prevalence of infection in specific populations defined by risk behaviors and demographic characteristics; and 4) assist in projecting the number of children and adults who will develop HIV-associated illness and require medical care.

The serosurveys are clinic-based and are conducted annually in selected sentinel sites throughout the State. They are designed to establish baseline HIV seroprevalence rates, monitor HIV trends in known high-risk or cross-over groups, and serve as an early warning system for the possible spread of HIV from these groups into the general population.

All of these surveys use anonymous, unlinked (blinded) HIV testing. In unlinked surveys, samples gathered from discarded blood originally collected from consecutive eligible clients for routine diagnostic purposes are tested for HIV antibodies after all personal identifying information has been removed. The HIV test results as well as risk information obtained from medical records cannot be linked to specific individuals.

This summary presents results of the HIV serosurveillance activities from surveys in sentinel sites in California during 1999. The selected clinical settings are sexually transmitted disease (STD) clinics. In addition, this report includes data obtained from other sources: HIV screening by blood collection agencies of blood donations, HIV screening by the Department of Defense of civilian applicants for military service, and 1998 Survey of Childbearing Women data. In 1995 the CDC, at the request of the Assistant Secretary of Health and Human Services, discontinued the Survey of Childbearing Women. The CDHS/OA replicated this study during the third quarter of 1998 and performed Zidovudine (ZDV) determination on all HIV-positive specimens.

All of the surveys in this report measure HIV seroprevalence, which is the proportion of persons who have serologic evidence of HIV infection at a given time. Seroprevalence is influenced by the rate of new HIV infections (incidence) and by

attrition of HIV-infected persons from the population under study, often through illness or death.

HIV seroprevalence is a good indicator of future morbidity and health delivery needs because it measures the level of HIV infection in a population. Seroprevalence data from a single site should be interpreted with caution because the representativeness of the sample population may be changing.

Highlights

Sexually Transmitted Disease Clinics

In 1999, a total of 17,620 serum samples were tested for the presence of HIV antibody at 19 STD clinics in 11 local health departments[1] (Table 2). Statewide, the seroprevalence (3.4 percent) at STD clinics increased from 2.4 percent in 1998[2].

The overall HIV seroprevalence among men in 1999 was 4.9 percent and among women was 0.4 percent (Table 3). By risk behavior, the highest seroprevalence (27.0 percent) in STD clinics was among men who reported sex with men who also injected drugs, up from 19.0 percent in 1998.

Among men in the sample, seroprevalence was highest (9.9 percent) in the White racial/ethnic group (Table 4). Among women, the Black racial/ethnic group had the highest seroprevalence (0.6 percent), down from 0.9 percent in 1998.

Figures 7-14 present trends in HIV seroprevalence among persons attending STD clinics in eight regions of California for years 1994–1999, by Race/Ethnicity, Age Group and Risk Behavior.

California Blood Banks and Plasma Centers

In 1999, 721,055 specimens from selected California blood banks[3] were tested, of which 19 (0.003) percent were seropositive (Table 23). In 1999, 637,908 specimens from selected California plasma centers[4] were tested, of which 47 (0.007 percent) were HIV seropositive (Table 24).

---

[1] Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, Santa Clara, Long Beach, Berkeley.

[2] All 1998 data from: State of California, Department of Health Services, Office of AIDS, HIV/AIDS Epidemiology Branch; California HIV Seroprevalence Annual Report 1998, August 2000.

[3] Fresno, Kern, Long Beach, Los Angeles, Pasadena. Sacramento, San Diego, San Francisco, San Joaquin, and Santa Clara.

[4] Fresno, Kern, Long Beach, Los Angeles, Sacramento, San Bernardino, San Diego and San Joaquin.

Civilian Applicants for Military Service

In 1999, a total of 19,049 serum samples were tested among persons applying for military service in nine selected counties[5], of which five were HIV seropositive. HIV seroprevalence was 0.03 percent (Table 25).

Men represented 80.7 percent of the total civilian applicants among these counties, of which 0.03 percent were HIV seropositive (Table 26). Women represented 19.3 percent with HIV prevalence of 0.03 (Table 27).

Survey of Childbearing Women

During 1998, 76,166 specimens were tested among selected counties[6] for maternal HIV antibodies (Table 28). The seroprevalence rate was 0.08 percent.

By age group, women aged 35 & Over had the highest seroprevalence, followed by age group 25-29.

By race/ethnicity, Black women showed the highest (0.38 percent) seroprevalence rate (Table 29).

[5]Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, Santa Clara.

[6]Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, Santa Clara, Long Beach, Berkeley.

PROPOSED NON-NAME BASED HIV REPORTING SYSTEM IN CALIFORNIA

The advents of new human immunodeficiency virus (HIV) treatments in recent years have drastically changed the nature of the HIV epidemic. These treatment advances have reduced morbidity and mortality among individuals infected with HIV and significantly delayed the progression of HIV to the most advanced stage of the disease, namely, acquired immunodeficiency syndrome (AIDS). Consequently, exclusive reliance on AIDS case surveillance information to monitor and characterize various aspects of the HIV epidemic will produce an incomplete picture of the HIV-infected population.

There is a compelling need to provide more accurate, complete and timely information on the HIV epidemic to assist in the development of effective education, prevention, early intervention, care and treatment programs. In response to this need, the State Office of AIDS (OA) has proposed new regulations (R-19-00) for the reporting of individuals infected with HIV. While maintaining the existing name-based surveillance methods for AIDS, the proposed regulations require providers of service and laboratories licensed to conduct HIV-related testing in California to report individuals with confirmed test results indicative of HIV infection to the appropriate local health departments using a non-name code. The local health departments shall, in turn, forward unduplicated HIV case reports to the OA using the non-name code.

The period for public comment for the proposed regulations began on March 30, 2001 and ended on May 21, 2001. The OA is currently reviewing the comments and making necessary revisions to the regulation. The proposed non-name-based surveillance system is tentatively scheduled for implementation during the later part of fiscal year 2001-2002.

SEXUALLY TRANSMITTED DISEASE CLINICS

SURVEYS OF ADULTS ATTENDING SEXUALLY TRANSMITTED DISEASE (STD) CLINICS

STD clinics serve persons at increased risk of infectious disease due to unprotected sex and other behaviors such as injection drug use. During 1999, STD clinics in 11 local health departments[1] conducted unlinked surveys to determine rates of HIV infection among adults attending STD clinics. Serum samples from clients who were being evaluated for a possible STD and who had not previously visited the clinic since initiation of the survey in any calendar year were included in the survey. Clients attending the clinic solely for HIV testing are eligible for the survey if they have blood drawn for purposes other than HIV testing. Eligible specimens were selected consecutively to meet a desired sample size of at least 500 clients at each clinic.

Beginning in 1997, revised data collection forms and software were implemented which included changes in Risk Behavior and Age Group categories.

STD clinics serve large numbers of HIV-infected persons. HIV surveillance in these clinics provides important information about populations at greatest risk for HIV infection. Serosurveillance may also provide an early warning of the heterosexual spread of HIV infection, since those at greatest risk of heterosexual transmission are likely to be those also at risk of acquiring other STDs.

This report summarizes results for 1999 from 19 STD clinics in selected California counties and cities. Statewide, the seroprevalence at the clinics increased from 2.4 percent in 1998[2] to 3.4 percent in 1999 (Table 1).

Selected California counties and cities submitted between 109 and 9,187 serum specimens each for a total of 17,620 serum samples tested during 1999 (Table 2).

HIV seroprevalence varied by region, from a high of 9.4 percent in San Francisco to a low of zero positives in the South Valley (Table 1, Figure 1). The seroprevalence for San Francisco, San Diego, Los Angeles, North Valley, Bay Area and Long Beach regions showed an increase from 1998. However, the seroprevalence for Central Valley decreased and South Valley remained the same. Among selected counties the highest percent increase between 1998 and 1999 was in Sacramento County.

Men represented 66.7 percent (11,753) of the total STD population of which 4.9 percent (575) were HIV seropositive, compared to 3.5 percent in 1998 (Table 3). Women

[1] Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, Santa Clara, Long Beach, and Berkeley.

[2] All 1998 data from: State of California, Department of Health Services, Office of AIDS, HIV/AIDS Epidemiology Branch; California HIV Seroprevalence Annual Report 1998, August 2000.

represented 33.1 percent (5,831) of the total STD population of which 0.4 percent (25) were HIV seropositive, a decrease from 0.5 percent in 1998. The highest seroprevalence (27.0 percent) was among men who reported sex with men who injected drugs, compared to 19.0 percent in 1998 (an increase of 42.1 percent). Men who have sex with men showed a prevalence of 19.1 percent, up from 16.5 percent in 1998. Among Heterosexuals, men showed a seroprevalence of 0.8 percent, and women showed a seroprevalence of 0.4 percent, both remaining the same compared to 1998.

In 1999, 37.0 percent (6,527) of the specimens tested in the STD clinics were drawn from Black clients; 34.9 percent (6,146) from Hispanics; 21.4 percent (3,776) from Whites; and 4.2 percent (735) from Asian/Pacific Islanders (Table 4, Figure 2). Seroprevalence for White men (9.9 percent) increased compared to 1998 (6.3 percent), however White women remained at 0.4 percent. Among Black men the seroprevalence showed an increase from 2.8 percent in 1998 to 3.3 percent in 1999. Black women showed a decrease from 0.9 percent in 1998 to 0.6 percent in 1999. The seroprevalence for both Hispanic men (3.2 percent) and Hispanic women (0.2 percent) decreased compared to 1998 (2.6 and 0.1 percent, respectively). The seroprevalence for Asian/Pacific Islander men (3.6 percent) and women (0.3 percent) decreased from 1998 (2.0 and 0.0 percent, respectively).

Age group 35-39 had the highest seroprevalence (9.8 percent) and represented 13.8 percent of men attending STD clinics (Table 5, Figure 3). Among women the seroprevalence for age group 40-44 was the highest (0.9 percent), and represented 7.8 percent of women attending STD clinics.

Table 6 and Figure 4 present HIV seroprevalence for men who have sex with men (MSM) and MSM who have a history of injection drug use (IDU) attending STD clinics by race/ethnicity. In 1999, HIV seroprevalence ranged from a high of 30.1 (84/279) percent among Black men to a low of 7.4 (7/94) percent among Asian/Pacific Islander men. By age group the highest seroprevalence (31.4 percent) was among age group 40-44 (Table 7).

Tables 8, 9 and Figure 5 present HIV seroprevalence for heterosexual males and females attending STD clinics by race/ethnicity. In 1999, the highest HIV seroprevalence was for Asian/Pacific Islander males (1.4 percent) and Black females (0.6 percent).

The highest seroprevalence (1.7 percent) among heterosexual males was in age group 35-39 (Table 10 and Figure 6). Among women, seroprevalence was 0.9 percent for age groups 35-39 and 40-44 (Table 11).

Tables 12 through 22 present seroprevalence data from the sentinel sites by risk behavior, race/ethnicity and age group.

Table 1.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics By California Regions 1998 – 1999

Regions[2]	Number Tested 1999	Number Positive[3] 1999	Prevalence (%)		Percent Change 1998 to 1999
			1998	1999	
San Francisco[4]	4,343	409	7.2	9.4	30.6
San Diego[5]	498	19	2.4	3.8	58.3
Los Angeles	9,187	146	1.3	1.6	23.1
North Valley[5]	470	7	0.6	1.5	150.0
Bay Area[5]	576	8	0.8	1.4	75.0
Long Beach[5]	551	6	1.0	1.1	10.0
Central Valley[5]	1,504	6	0.7	0.4	- 42.9
South Valley[5]	491	0	0.0	0.0	0.0
Total	17,620	601	2.4	3.4	41.7

[1] These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2] North Valley = Sacramento. Bay Area = City of Berkeley and Santa Clara. Central Valley = Fresno, Kern, and San Joaquin. South Valley = San Bernardino.

[3] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

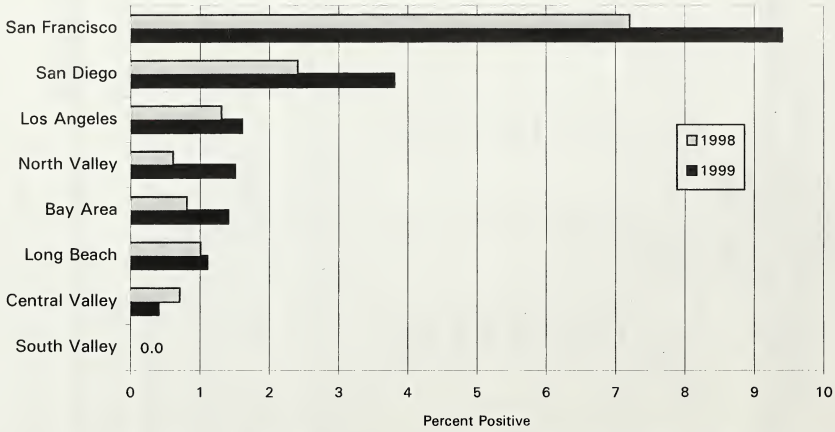
[4] Data collection for July – December 1999.

[5] Data collection for January - June 1999.

Note: Region totals include unknown gender and may not agree with individual County/City totals (Tables 12-22).

Source: California Department of Health Services, Office of AIDS.

Figure 1. HIV Seroprevalence Among Persons Attending STD Clinics by Region (Selected Counties and Cities), 1998 - 1999



Note: South Valley = San Bernardino County. North Valley = Sacramento. Central Valley = Fresno, Kern, and San Joaquin Counties. Bay Area = City of Berkeley and Santa Clara County.

Source: California Department of Health Services, Office of AIDS.

Table 2.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics By Selected California Counties and Cities 1998 - 1999

Selected Counties and Cities	Number Tested 1999	Number Positive[2] 1999	Prevalence (%)		Percent Change 1998 to 1999
			1998	1999	
Fresno[3]	508	2	0.4	0.4	0.0
Kern[3]	496	2	0.6	0.4	-33.3
Los Angeles	9,187	146	1.3	1.6	23.1
Sacramento[3]	470	7	0.6	1.5	150.0
San Bernardino[3]	491	0	0.0	0.0	0.0
San Diego[3]	498	19	2.4	3.8	58.3
San Francisco[4]	4,343	409	7.2	9.4	30.6
San Joaquin[3]	500	2	1.0	0.4	-60.0
Santa Clara[3]	109	1	0.0	0.9	a
Long Beach[3]	551	6	1.0	1.1	10.0
Berkeley[3]	467	7	1.4	1.5	7.1
Total	17,620	601	2.4	3.4	41.7

[1] These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[3] Data collection for January – June 1999.

[4] Data collection for July – December 1999.

[a] Not applicable.

Note: County and City totals include unknown gender and may not agree with individual County/City totals (Tables 12-22).

Source: California Department of Health Services, Office of AIDS.

Table 3.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Gender and Risk Behavior Category 1998 - 1999

Gender and Risk Behavior	Number Tested 1999	Number Positive[2] 1999	Prevalence (%) 1998	Prevalence (%) 1999	Percent Change 1998 to 1999
MALE					
MSM	1,993	380	16.5	19.1	15.8
MSM/IDU[3]	100	27	19.0	27.0	42.1
Heterosexual	8,979	69	0.8	0.8	0.0
Heterosexual, IDU	193	4	5.5	2.1	-61.8
Other[4]	24	6	a	25.0	a
Unknown	464	89	13.2	19.2	45.5
Sub-Total MALE	11,753	575	3.5	4.9	40.0
FEMALE					
Heterosexual	5,417	23	0.4	0.4	0.0
Heterosexual, IDU	107	1	1.8	0.9	-50.0
Other[4]	105	0	1.0	0.0	-100.0
Unknown	202	1	0.0	0.5	b
Sub-Total FEMALE	5,831	25	0.5	0.4	-20.0
Missing Gender	36	1	a	a	a
Total	17,620	601	2.4	3.4	41.7

[1] These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[3] Includes men who have sex with men (MSM) and bisexual men who have a history of injection drug use (IDU).

[4] Other includes Lesbian women and the following groups if they did not identify sex partner/s by gender: IDU, sex partner of IDU, sex partner of person with HIV/AIDS, exchanged money or drugs for sex.

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b] Not applicable.

Source: California Department of Health Services, Office of AIDS.

Table 4.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics Selected California Counties and Cities by Gender and Race/Ethnicity 1998 - 1999

Gender and Race/Ethnicity	Number Tested 1999	Number Positive[2] 1999	Prevalence (%) 1998	Prevalence (%) 1999	Percent Change 1998 –1999
MALE					
White	2,831	279	6.3	9.9	57.1
Black	4,216	138	2.8	3.3	17.9
Hispanic	4,042	128	2.6	3.2	23.1
Asian/Pacific Islander	412	15	2.0	3.6	80.0
American Indian/Alaskan Native	32	2	13.3	a	a
Other	122	5	2.6	4.1	57.7
Unknown	98	8	4.5	8.2	82.2
Sub-Total MALE	11,753	575	3.5	4.9	40.0
FEMALE					
White	945	4	0.4	0.4	0.0
Black	2,311	15	0.9	0.6	-33.3
Hispanic	2,104	4	0.1	0.2	100.0
Asian/Pacific Islander	323	1	0.0	0.3	b
American Indian/Alaskan Native	22	1	a	a	a
Other	67	0	a	a	a
Unknown	59	0	a	a	a
Sub-Total FEMALE	5,831	25	0.5	0.4	-20.0
Missing Gender	36	1	a	a	a
Total	17,620	601	2.4	3.4	41.7

[1] These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

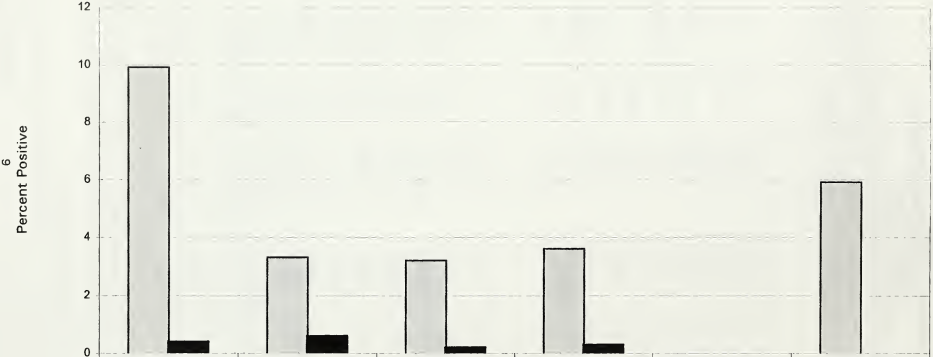
[2] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b] Not applicable.

Source: California Department of Health Services, Office of AIDS.

Figure 2. HIV Seroprevalence Among Persons Attending STD Clinics in Selected California Counties and Cities by Gender and Race/Ethnicity, 1999



	White	Black	Hispanic	Asian/P.I.	American Indian/A.N.	Other/Unknown
Men	9.9	3.3	3.2	3.6		5.9
Women	0.4	0.6	0.2	0.3		0

Note: Excludes American Indian/Alaskan Native women (not calculated for fewer than 100 tested and number positive less than or equal to 3).
Source: California Department of Health Services, Office of AIDS.

Table 5.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics Selected California Counties and Cities by Gender and Age Group 1998 – 1999

Gender and Age Group	Number Tested 1999	Number Positive[2] 1999	Prevalence (%) 1998	Prevalence (%) 1999	Percent Change 1998 to 1999
MALE					
14 and Under	12	0	a	a	a
15 – 19	759	1	b	0.1	c
20 – 24	2,334	21	b	0.9	c
25 – 29	2,470	57	b	2.3	c
30 – 34	2,069	121	b	5.8	c
35 – 39	1,619	158	b	9.8	c
40 – 44	1,070	100	b	9.3	c
45 and Over	1,365	115	5.2	8.4	61.5
Unknown	55	2	a	a	a
Sub-Total MALE	11,753	575	3.5	4.9	40.0
FEMALE					
14 and Under	46	0	a	a	a
15 – 19	959	2	b	0.2	c
20 – 24	1,433	2	b	0.1	c
25 – 29	1,071	7	b	0.7	c
30 – 34	733	3	b	0.4	c
35 – 39	595	5	b	0.8	c
40 – 44	456	4	b	0.9	c
45 and Over	497	2	0.5	0.4	-0.5
Unknown	41	0	a	a	a
Sub-Total FEMALE	5,831	25	0.5	0.4	-20.0
Missing Gender	36	1	a	a	a
Total	17,620	601	2.4	3.4	41.7

[1] These unlinked (blinded) surveys were drawn from blood specimens collected for routine screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

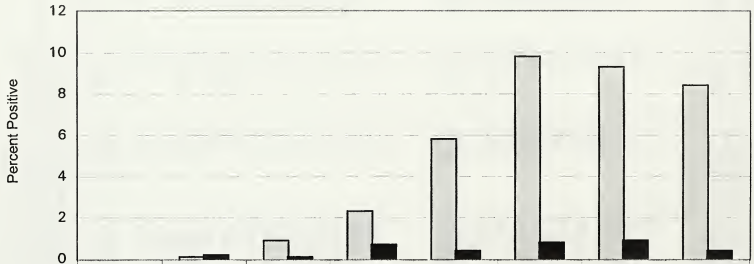
[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b] Not available.

[c] Not applicable.

Source: California Department of Health Services, Office of AIDS.

Figure 3. HIV Seroprevalence Among Persons Attending STD Clinics in Selected California Counties and Cities by Gender and Age Group, 1999



	14 and Under	15-19	20-24	25-29	30-34	35-39	40-44	45 and Over
Men		0.1	0.9	2.3	5.8	9.8	9.3	8.4
Women		0.2	0.1	0.7	0.4	0.8	0.9	0.4

Note: Excludes Age Groups 14 and Under and Unknown age group (not calculated for fewer than 100 tested and number positive less than or equal to 3).
Source: California Department of Health Services, Office of AIDS.

Table 6.
HIV Seroprevalence for MSM[1]
Attending Sexually Transmitted Disease (STD)[2] Clinics
Selected California Counties and Cities
by Race/Ethnicity
1998 - 1999

Race/Ethnicity	Number Tested 1999	Number Positive[3] 1999	Prevalence (%)		Percent Change 1998 - 1999
			1998	1999	
White	1,130	223	15.7	19.7	25.5
Black	279	84	26.6	30.1	13.2
Hispanic	547	85	14.7	15.5	5.4
Asian/Pacific Islander	94	7	6.0	7.4	23.3
American Indian/Alaskan Native	8	2	36.4	a	a
None of the Above[4]	35	6	16.1	17.1	6.2
Total	2,093	407	16.6	19.4	16.9

[1] Includes men who have sex with men (MSM) and MSM who have a history of injection drug use (IDU).

[2] These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

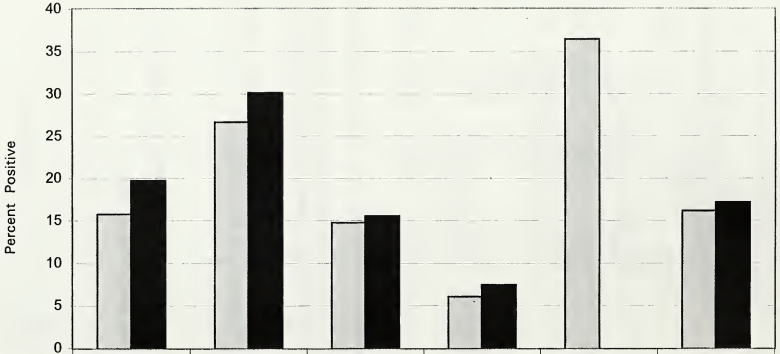
[3] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[4] Includes other race, unknown race.

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.

Figure 4. HIV Seroprevalence Among MSM Attending STD Clincics in Selected California Counties and Cities by Race/Ethnicity, 1998 - 1999



	White	Black	Hispanic	Asian/P.I.	Amer. Ind./A.N.	Other/Unknown
□1998	15.7	26.6	14.7	6	36.4	16.1
■1999	19.7	30.1	15.5	7.4		17.1

Note: Excludes 1999 American Indian/Alaskan Native men (not calculated for fewer than 100 tested and number positive less than or equal to 3).
Source: California Department of Health Services, Office of AIDS.

Table 7.
HIV Seroprevalence for MSM[1]
Attending Sexually Transmitted Disease (STD)[2] Clinics
Selected California Counties and Cities
by Age Group
1998 - 1999

Age Group	Number Tested 1999	Number Positive[3] 1999	Prevalence (%)		Percent Change 1998 to 1999
			1998	1999	
14 and Under	a	0	b	b	b
15-19	59	0	c	b	d
20-24	243	14	c	5.8	d
25-29	361	35	c	9.7	d
30-34	489	87	c	17.8	d
35-39	402	114	c	28.4	d
40-44	239	75	c	31.4	d
45 and Over	293	81	19.3	27.6	43.0
Unknown	5	1	c	b	d
Total	2,093	407	16.6	19.4	16.9

[1]Includes men who have sex with men (MSM) and MSM men who have a history of injection drug use (IDU).

[2]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[3]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a]Less than 5.

[b]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[c]Not available.

[d]Not applicable.

Source: California Department of Health Services, Office of AIDS.

Table 8.
HIV Seroprevalence for Heterosexual Males[1]
Attending Sexually Transmitted Disease (STD)[2] Clinics
Selected California Counties and Cities
by Race/Ethnicity
1998 - 1999

Race/Ethnicity	Number Tested 1999	Number Positive[3] 1999	Prevalence (%)		Percent Change 1998 -1999
			1998	1999	
White	1,516	8	0.4	0.5	25.0
Black	3,837	39	1.2	1.0	-16.7
Hispanic	3,372	21	0.7	0.6	-14.3
Asian/Pacific Islander	286	4	0.0	1.4	a
American Indian/Alaskan Native	22	0	b	b	b
None of the Above[4]	139	1	0.0	0.7	a
Total	9,172	73	0.9	0.8	-11.1

[1] Includes men who have a history of injection drug use (IDU).

[2]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[3] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[4] Includes other race, unknown race.

[a]Not applicable.

[b] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.

Table 9.
HIV Seroprevalence for Heterosexual Females[1] Attending Sexually Transmitted Disease (STD)[2] Clinics Selected California Counties and Cities by Race/Ethnicity 1998 - 1999

Race/Ethnicity	Number Tested 1999	Number Positive[3] 1999	Prevalence (%)		Percent Change 1998 - 1999
			1998	1999	
White	870	4	0.4	0.5	25.0
Black	2,213	14	0.9	0.6	-33.0
Hispanic	2,035	4	0.1	0.2	100.0
Asian/Pacific Islander	280	1	0.0	0.4	a
American Indian/Alaskan Native	21	1	b	b	b
None of the Above[4]	105	0	b	0.0	b
Total	5,524	24	0.5	0.4	-20.0

[1] Includes women who have a history of injection drug use (IDU).

[2] These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[3] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

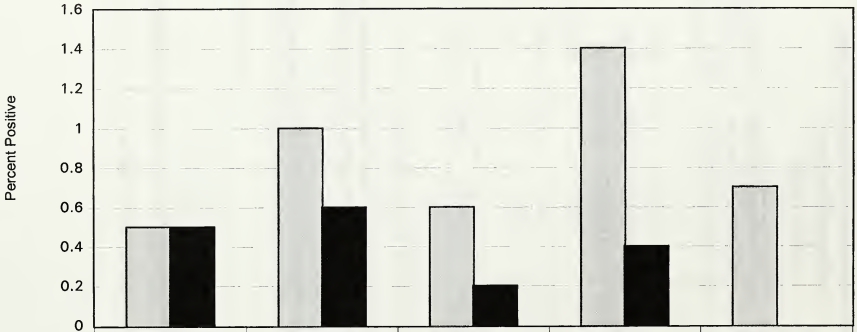
[4] Includes other race, unknown race.

[a] Not applicable.

[b] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.

Figure 5. HIV Seroprevalence Among Heterosexuals Attending STD Clinics in Selected California Counties and Cities by Gender and Race/Ethnicity, 1999



	White	Black	Hispanic	Asian/P.I.	Other/Unknown
☐Men	0.5	1	0.6	1.4	0.7
■Women	0.5	0.6	0.2	0.4	0

Note: Excludes American Indian/Alaskan Native race/ethnicity (not calculated for fewer than 100 tested and number positive less than or equal to 3).

Source: California Department of Health Services, Office of AIDS.

Table 10.
HIV Seroprevalence for Heterosexual Males[1]
Attending Sexually Transmitted Disease (STD)[2] Clinics
Selected California Counties and Cities
by Age Group
1998 - 1999

Age Group	Number Tested 1999	Number Positive[3] 1999	Prevalence (%)		Percent Change 1998 to 1999
			1998	1999	
14 and Under	9	0	a	a	a
15-19	686	1	b	0.1	c
20-24	2,026	4	b	0.2	c
25-29	2,012	9	b	0.4	c
30-34	1,483	12	b	0.8	c
35-39	1,146	20	b	1.7	c
40-44	780	12	b	1.5	c
45 and Over	990	15	1.6	1.5	-6.3
Unknown	40	0	b	a	c
Total	9,172	73	0.9	0.8	-11.1

[1]Includes men who have a history of injection drug use (IDU).

[2]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[3]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b]Not available.

[c]Not applicable.

Source: California Department of Health Services, Office of AIDS.

Table 11.
HIV Seroprevalence for Heterosexual Females[1] Attending Sexually Transmitted Disease (STD)[2] Clinics Selected California Counties and Cities by Age Group 1998 - 1999

Age Group	Number Tested 1999	Number Positive[3] 1999	Prevalence (%)		Percent Change 1998 to 1999
			1998	1999	
14 and Under	43	0	a	a	a
15-19	923	2	b	0.2	c
20-24	1,364	2	b	0.1	c
25-29	1,002	6	b	0.6	c
30-34	700	3	b	0.4	c
35-39	556	5	b	0.9	c
40-44	428	4	b	0.9	c
45 and Over	475	2	0.5	0.4	-20.0
Unknown	33	0	b	a	c
Total	5,524	24	0.5	0.4	-20.0

[1]Includes women who have a history of injection drug use (IDU).

[2]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[3]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

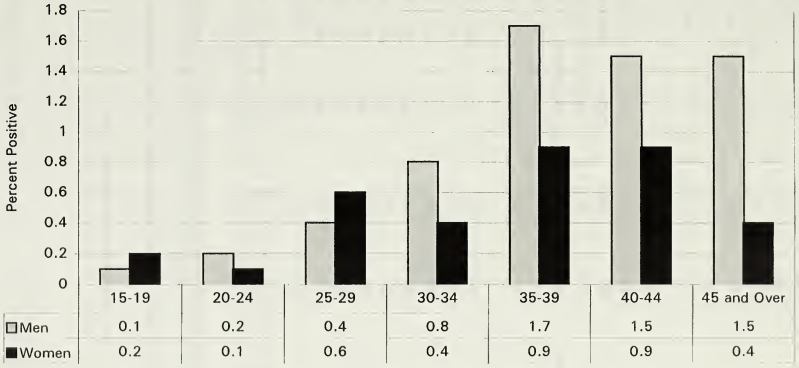
[a]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b]Not available.

[c]Not applicable.

Source: California Department of Health Services, Office of AIDS.

Figure 6. HIV Seroprevalence Among Heterosexuals Attending STD Clinics in Selected California Counties and Cities by Gender and Age Group, 1999



	15-19	20-24	25-29	30-34	35-39	40-44	45 and Over
Men	0.1	0.2	0.4	0.8	1.7	1.5	1.5
Women	0.2	0.1	0.6	0.4	0.9	0.9	0.4

Note: Excludes Age Groups 14 and Under and Unknown age group (not calculated for fewer than 100 tested and number positive less than or equal to 3).
Source: California Department of Health Services, Office of AIDS.

Table 12.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category Fresno County, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	12	0	a	b	b	b
	MSM, IDU	0	0	a	b	b	b
	Heterosexual	308	1	0.3	172	1	0.6
	Heterosexual, IDU	c	0	a	c	0	a
	Other	0	0	a	7	0	a
	Unknown	c	0	a	c	0	a
Race/Ethnicity	White	37	0	a	27	0	a
	Black	72	1	a	44	0	a
	Hispanic	184	0	0.0	98	1	1.0
	Asian/Pacific Islander	23	0	a	10	0	a
	American Ind/Alsk Native	c	0	a	c	0	a
	Other	c	0	a	0	0	a
	Unknown	c	0	a	c	0	a
Age Group	14 and Under	c	0	a	c	0	a
	15-19	44	0	a	20	0	a
	20-24	66	0	a	46	0	a
	25-29	49	0	a	31	1	a
	30-34	58	0	a	25	0	a
	35-39	39	0	a	23	0	a
	40-44	26	0	a	16	0	a
	45 and Over	31	1	a	12	0	a
	Unknown	10	0	a	7	0	a
Total		323	1	0.3	183	1	0.5

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b] Not applicable.

[c] Less than 5.

Source: California Department of Health Services, Office of AIDS.

Table 13.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category Kern County, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	24	2	a	b	b	b
	MSM, IDU	c	0	a	b	b	b
	Heterosexual	252	0	0.0	189	0	0.0
	Heterosexual, IDU	7	0	a	5	0	a
	Other	c	0	a	11	0	0.0
	Unknown	0	0	a	c	0	a
Race/Ethnicity	White	80	0	a	57	0	a
	Black	78	1	a	50	0	a
	Hispanic	121	1	0.8	89	0	a
	Asian/Pacific Islander	c	0	a	c	0	a
	American Ind/Alsk Native	0	0	a	0	0	a
	Other	c	0	a	c	0	a
	Unknown	c	0	a	5	0	a
Age Group	14 and Under	c	0	a	14	0	a
	15-19	71	0	a	74	0	a
	20-24	64	0	a	31	0	a
	25-29	36	0	a	32	0	a
	30-34	37	1	a	14	0	a
	35-39	29	0	a	10	0	a
	40-44	23	1	a	9	0	a
	45 and Over	22	0	a	17	0	a
	Unknown	c	0	a	5	0	a
Total		285	2	0.7	206	0	0.0

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b] Not applicable.

[c] Less than 5.

Source: California Department of Health Services, Office of AIDS.

Table 14.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category Los Angeles County, January – December 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	509	81	15.9	a	a	a
	MSM, IDU	30	4	13.3	a	a	a
	Heterosexual	5,138	41	0.8	3,273	12	0.4
	Heterosexual, IDU	95	2	b	43	0	b
	Lesbian	a	a	a	14	0	b
	Other	0	0	b	0	0	b
	Unknown	57	6	10.5	28	0	b
Race/Ethnicity	White	438	24	5.5	170	1	0.6
	Black	2,787	44	1.6	1,639	9	0.5
	Hispanic	2,398	52	2.2	1,398	1	0.1
	Asian/Pacific Islander	79	2	b	76	1	b
	American Ind/Alsk Native	8	2	b	11	0	b
	Other	47	4	8.5	27	0	b
	Unknown	72	6	8.3	37	0	b
Age Group	14 and Under	8	0	b	14	0	b
	15-19	407	1	0.2	567	1	0.2
	20-24	1,307	10	0.8	808	1	0.1
	25-29	1,240	22	1.8	581	1	0.2
	30-34	976	31	3.2	416	1	0.2
	35-39	752	30	4.0	363	4	1.1
	40-44	497	21	4.2	277	3	1.1
	45 and Over	616	17	2.8	317	1	0.3
	Unknown	26	2	b	15	0	b
Total		5,829	134	2.3	3,358	12	0.4

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a] Not applicable.

[b]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.

Table 15.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category Sacramento County, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	9	1	a	b	b	b
	MSM, IDU	c	0	a	b	b	b
	Heterosexual	174	2	1.1	189	3	1.6
	Heterosexual, IDU	5	0	a	c	0	a
	Other	c	0	a	12	0	a
	Unknown	26	0	a	26	0	a
Race/Ethnicity	White	75	2	a	58	1	a
	Black	84	1	a	80	2	a
	Hispanic	42	0	a	74	0	a
	Asian/Pacific Islander	11	0	a	7	0	a
	American Ind/Alsk Native	0	0	a	c	0	a
	Other	5	0	a	5	0	a
	Unknown	0	0	a	5	0	a
Age Group	14 and Under	c	0	a	5	0	a
	15-19	24	0	a	47	0	a
	20-24	72	1	a	41	1	a
	25-29	31	0	a	42	0	a
	30-34	29	0	a	34	1	a
	35-39	19	1	a	26	1	a
	40-44	13	0	a	13	0	a
	45 and Over	20	1	a	13	0	a
	Unknown	9	0	a	9	0	a
Total		217	3	1.4	230	3	1.3

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b] Not applicable.

[c] Less than 5.

Source: California Department of Health Services, Office of AIDS.

Table 16.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease(STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category San Bernardino County, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	17	0	a	b	b	b
	MSM, IDU	c	0	a	b	b	b
	Heterosexual	247	0	0.0	196	0	0.0
	Heterosexual, IDU	10	0	a	c	0	a
	Other	0	0	a	6	0	a
	Unknown	6	0	a	3	0	a
Race/Ethnicity	White	88	0	a	71	0	a
	Black	78	0	a	39	0	a
	Hispanic	99	0	a	74	0	a
	Asian/Pacific Islander	c	0	a	14	0	a
	American Ind/Alsk Native	1	0	a	c	0	a
	Other	11	0	a	10	0	a
	Unknown	c	0	a	c	0	a
Age Group	14 and Under	c	0	a	c	0	a
	15-19	44	0	a	49	0	a
	20-24	72	0	a	54	0	a
	25-29	55	0	a	30	0	a
	30-34	31	0	a	20	0	a
	35-39	36	0	a	17	0	a
	40-44	17	0	a	19	0	a
	45 and Over	22	0	a	16	0	a
	Unknown	c	0	a	c	0	a
Total		281	0	0.0	209	0	0.0

[1] These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b] Not applicable.

[c] Less than 5.

Source: California Department of Health Services, Office of AIDS.

Table 17.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category San Diego County, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	41	12	29.3	a	a	a
	MSM, IDU	b	0	c	a	a	a
	Heterosexual	292	7	2.4	155	0	0.0
	Heterosexual, IDU	b	0	c	0	0	c
	Other	0	0	c	b	0	c
	Unknown	b	0	c	5	0	c
Race/Ethnicity	White	148	8	5.4	67	0	c
	Black	82	6	7.3	26	0	c
	Hispanic	78	4	5.1	45	0	c
	Asian/Pacific Islander	8	1	c	13	0	c
	American Ind/Alsk Native	b	0	c	b	0	c
	Other	8	0	c	5	0	c
	Unknown	11	0	c	5	0	c
Age Group	14 and Under	b	0	c	b	0	c
	15-19	6	0	c	14	0	c
	20-24	53	0	c	51	0	c
	25-29	89	2	c	18	0	c
	30-34	60	5	8.3	29	0	c
	35-39	44	6	13.6	15	0	c
	40-44	39	4	10.3	13	0	c
	45 and Over	44	2	c	22	0	c
	Unknown	b	0	c	b	0	c
Total		336	19	5.7	162	0	0.0

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a]Not applicable.

[b]Less than 5.

[c]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.

Table 18.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category San Francisco County, July – December 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	1,296	276	21.3	a	a	a
	MSM, IDU	57	23	40.4	a	a	a
	Heterosexual	1,604	12	0.7	758	6	0.8
	Heterosexual, IDU	54	1	b	36	1	b
	Other	20	6	30.0	29	0	b
	Unknown	359	83	23.1	130	1	0.8
Race/Ethnicity	White	1,676	240	14.3	340	2	0.6
	Black	695	78	11.2	247	3	1.2
	Hispanic	751	69	9.2	202	2	1.0
	Asian/Pacific Islander	224	11	4.9	151	0	0.0
	American Ind/Alsk Native	18	0	b	c	1	b
	Other	18	1	b	7	0	b
	Unknown	8	2	b	c	0	b
Age Group	14 and Under	0	0	b	0	0	b
	15-19	69	0	b	96	0	b
	20-24	428	9	2.1	274	0	b
	25-29	747	32	4.3	239	5	2.1
	30-34	726	82	11.3	126	1	0.8
	35-39	568	114	20.1	85	0	b
	40-44	366	73	19.9	73	1	b
	45 and Over	485	91	18.8	58	1	b
	Unknown	c	0	a	c	0	a
Total		3,390	401	11.8	953	8	0.8

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening on individuals seeking evaluation, examination, and/or for a new STD episode. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a]Not applicable.

[b]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[c] Less than 5.

Source: California Department of Health Services, Office of AIDS.

Table 19.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category San Joaquin County, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	15	0	a	b	b	b
	MSM, IDU	0	0	a	b	b	b
	Heterosexual	351	2	0.6	111	0	0.0
	Heterosexual, IDU	c	0	a	c	0	a
	Other	c	0	a	8	0	a
	Unknown	c	0	a	c	0	a
Race/Ethnicity	White	76	0	a	32	0	a
	Black	92	2	a	42	0	a
	Hispanic	184	0	0.0	43	0	a
	Asian/Pacific Islander	14	0	a	6	0	a
	American Ind/Alsk Native	c	0	a	0	0	a
	Other	8	0	a	c	0	a
	Unknown	0	0	a	0	0	a
Age Group	14 and Under	c	0	a	c	0	a
	15-19	36	0	a	22	0	a
	20-24	98	0	a	21	0	a
	25-29	67	0	a	20	0	a
	30-34	54	0	a	19	0	a
	35-39	45	1	a	19	0	a
	40-44	25	0	a	8	0	a
	45 and Over	48	1	a	12	0	a
	Unknown	0	0	a	0	0	a
Total		375	2	0.5	124	0	0.0

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b]Not applicable.

[c] Less than 5.

Source: California Department of Health Services, Office of AIDS.

Table 20.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category
Santa Clara County, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	6	0	a	b	b	b
	MSM, IDU	0	0	a	b	b	b
	Heterosexual	89	1	a	13	0	a
	Heterosexual, IDU	0	0	a	0	0	a
	Other	0	0	a	0	0	a
	Unknown	c	0	a	0	0	a
Race/Ethnicity	White	29	0	a	6	0	a
	Black	14	0	a	0	0	a
	Hispanic	46	1	a	c	0	a
	Asian/Pacific Islander	6	0	a	c	0	a
	American Ind/Alsk Native	c	0	a	0	0	a
	Other	0	0	a	0	0	a
	Unknown	0	0	a	0	0	a
Age Group	14 and Under	0	0	a	0	0	a
	15-19	7	0	a	c	0	a
	20-24	16	0	a	c	0	a
	25-29	28	0	a	c	0	a
	30-34	14	0	a	c	0	a
	35-39	10	1	a	c	0	a
	40-44	14	0	a	c	0	a
	45 and Over	7	0	a	c	0	a
	Unknown	0	0	a	0	0	a
Total		96	1	a	13	0	a

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b]Not applicable.

[c] Less than 5.

Source: California Department of Health Services, Office of AIDS.

Table 21.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category Long Beach City, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	35	3	a	b	b	b
	MSM, IDU	c	0	a	b	b	b
	Heterosexual	292	1	0.3	188	1	0.5
	Heterosexual, IDU	14	1	a	5	0	a
	Other	0	0	a	13	0	a
	Unknown	0	0	a	0	0	a
Race/Ethnicity	White	79	3	a	47	0	a
	Black	125	2	1.6	78	1	a
	Hispanic	105	0	0.0	52	0	a
	Asian/Pacific Islander	30	0	a	24	0	a
	American Ind/Alsk Native	c	0	a	c	0	a
	Other	5	0	a	c	0	a
	Unknown	0	0	a	0	0	a
Age Group	14 and Under	0	0	a	c	0	a
	15-19	35	0	a	46	1	a
	20-24	96	1	a	56	0	a
	25-29	77	0	a	40	0	a
	30-34	41	1	a	22	0	a
	35-39	36	2	a	16	0	a
	40-44	26	0	a	13	0	a
	45 and Over	34	1	a	11	0	a
	Unknown	0	0	a	0	0	a
Total		345	5	1.4	206	1	0.5

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b]Not applicable.

[c] Less than 5.

Source: California Department of Health Services, Office of AIDS.

Table 22.
HIV Seroprevalence Among Persons Attending Sexually Transmitted Disease (STD)[1] Clinics by Risk Behavior, Race/Ethnicity, and Age Group Category Berkeley City, January – June 1999

Risk Behavior/ Demographic Categories		Males			Females		
		Number Tested	Number Positive[2]	Prevalence (%)	Number Tested	Number Positive[2]	Prevalence (%)
Risk Behavior	MSM	29	5	17.2	a	a	a
	MSM, IDU	b	0	c	a	a	a
	Heterosexual	232	2	0.9	173	0	0.0
	Heterosexual, IDU	b	0	c	5	0	c
	Other	b	0	c	b	0	c
	Unknown	7	0	c	6	0	c
Race/Ethnicity	White	105	2	1.9	70	0	c
	Black	109	3	2.8	66	0	c
	Hispanic	34	1	c	25	0	c
	Asian/Pacific Islander	12	1	c	16	0	c
	American Ind/Alsk Native	0	0	c	b	0	c
	Other	14	0	c	7	0	c
	Unknown	b	0	c	b	0	c
Age Group	14 and Under	0	0	c	b	0	c
	15-19	16	0	c	23	0	c
	20-24	62	0	c	48	0	c
	25-29	51	1	2.0	34	0	c
	30-34	43	1	c	27	0	c
	35-39	41	3	c	18	0	c
	40-44	24	1	c	14	0	c
	45 and Over	36	1	c	19	0	c
	Unknown	b	0	c	b	0	c
Total		276	7	2.5	187	0	0.0

[1]These unlinked (blinded) surveys were drawn from blood specimens collected for routine syphilis screening. Specimens were collected consecutively and tested for HIV after all personal identifiers were removed.

[2]All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot or Immunofluorescence Assay (IFA).

[a]Not applicable.

[b]Less than 5.

[c]Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.

TRENDS IN HIV SEROPREVALENCE AMONG STD PATIENTS BY REGION
1994 - 1999

Figures 7 through 14 present trends in HIV seroprevalence among persons attending sexually transmitted disease clinics in eight regions of California, 1994–1999.

In San Francisco, White patients had the highest HIV seroprevalence from 1994 through 1999. The prevalence of HIV infection peaked in 1999 for White and Black patients and in 1995 for Hispanic patients. White patients showed a steady decline of HIV infection between 1995 and 1998, rising sharply in 1999. Both Black and Hispanic patients showed a slight increase between 1996 and 1999. Patients aged 15-44 showed a slight decline for years 1995-1998 and a slight increase from 1998 to 1999. Seroprevalence for age group 45 & Over peaked in 1999. In all six years we see the same ranking for risk behavior: MSM IDU, MSM, Heterosexual IDU, and Heterosexuals. HIV seroprevalences fluctuated for MSM IDU, and remained steady for Heterosexuals and Heterosexual IDU patients. HIV seroprevalence among MSM patients declined through 1998, and slightly increased in 1999.

In San Diego, White patients had fluctuating HIV seroprevalences from 1994 through 1999. The prevalence of HIV infection peaked in 1997 for White and Hispanic patients and in 1999 for Black patients. Black patients showed an increase of HIV infection between 1996 and 1999. Both age groups (15-44 and 45 & Over) showed fluctuating HIV prevalence. MSM had the highest prevalence of HIV infection, declining sharply between 1997 and 1998, and rising sharply in 1999. The rates of HIV infection among heterosexual patients remained the lowest and steady.

In Los Angeles, White patients had the highest prevalence of HIV infection. HIV infection peaked in 1999. Both Black and Hispanic patients showed steady rates of HIV infection. Both age groups (15-44 and 45 & Over) had the highest prevalence of HIV infection in 1997. MSM and MSM IDU groups had the highest prevalence of HIV infection between 1994 and 1999. Both groups showed a decline in HIV infection in 1998. The rates among Heterosexuals and Heterosexuals IDU patients remained steady.

The Central Coast Region included the County of San Luis Obispo and the City of Long Beach for years 1994–1997 and City of Long Beach only for 1998-1999. The prevalence of HIV infection peaked in 1999 for Whites, in 1997 for Blacks and in 1998 for Hispanics. Both White and Black patients showed an increase of HIV infection in 1999; Hispanic patients had a sharp decline in 1999. Age group 15-44 years showed steady rates of HIV infection. Age group 45 & Over showed fluctuating rates of HIV infection. MSM had the highest prevalence of HIV infection, declining sharply from 1996 to 1998. The rate of HIV infection among Heterosexuals remained steady.

The Bay Area region includes the County of Santa Clara and the City of Berkeley. The

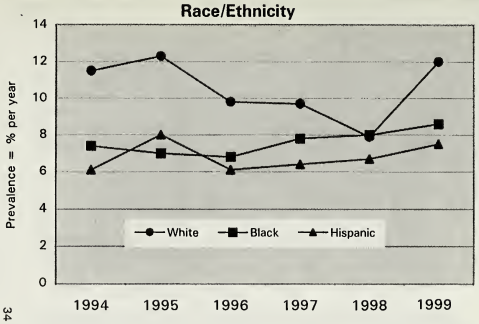
prevalence of HIV infection peaked in 1995 for Black and White patients. All race/ethnicity groups showed an increase in HIV infection in 1999. Age group 15-44 years showed a steady decline of HIV infection through 1998, showing an increase in 1999. Age group 45 and Over showed fluctuating rates of HIV infection. MSM had the highest prevalence of infection, declining from 1995 through 1998, and rising sharply in 1999. The rates of HIV infection among Heterosexual patients remained steady.

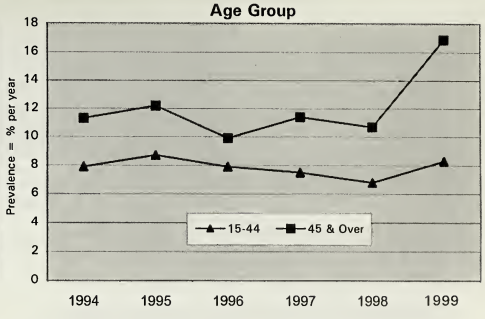
The Central Valley region includes the counties of Fresno, Kern, and San Joaquin. Black patients had the highest HIV seroprevalence, declining sharply from 1996 to 1997. White patients showed a steady decline through 1997, increasing slightly in 1998, and decreasing in 1999. Hispanic patients showed a decrease in HIV prevalence from 1994 through 1997, and rising slightly through 1999. Both age groups had the highest prevalence of HIV infection in 1994, and both age groups showed fluctuation in HIV prevalence. Heterosexuals had the highest prevalence in 1994, rising sharply from 1997 to 1998.

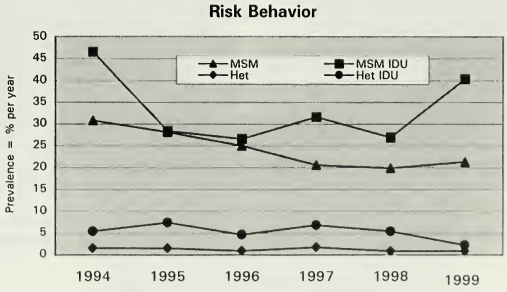
The North Valley region includes the counties of Sacramento and Solano for 1994 and 1995. Years 1996 through 1999 include Sacramento only. The prevalence of HIV infection peaked in 1999 for Whites and Blacks. Both White and Black patients showed fluctuating rates of infection, both showing an increase from 1997 to 1999. Age group 15-44 dropped sharply between 1996 and 1997, and peaked in 1999. Heterosexual patients showed fluctuating HIV prevalence, rising sharply between 1998 and 1999.

The South Valley region includes the counties of San Bernardino and Riverside counties for 1994 through 1996. HIV seroprevalence was highest among White patients. The prevalence of HIV infection peaked for Black and Hispanic patients in 1996 and in 1994 for White patients. Age group 15-44 peaked in 1994, declining through 1996. Heterosexuals had the highest prevalence in 1994, declining through 1996.

Figure 7. Temporal Trends in HIV Seroprevalence among STD Clinic Patients in San Francisco Region, 1994 - 1999

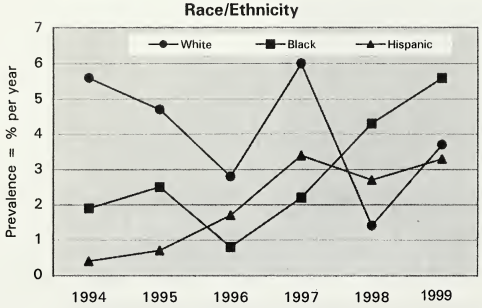




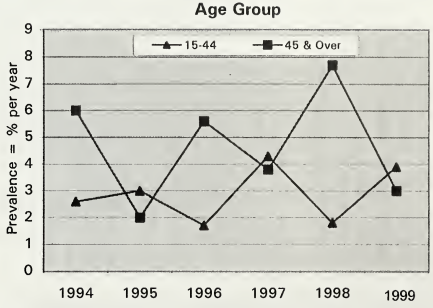


Source: California Department of Health Services, Office of AIDS.

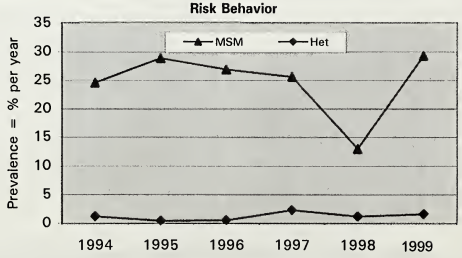
Figure 8. Temporal Trends in HIV Seroprevalence among STD Clinic Patients in San Diego Region, 1994 - 1999



Note: Data were collected for six months only in all categories.



Note: For years 1995 through 1997, and 1999 there were less than 100 tested and less than or equal to 3 positive test results for age group 45 & Over.

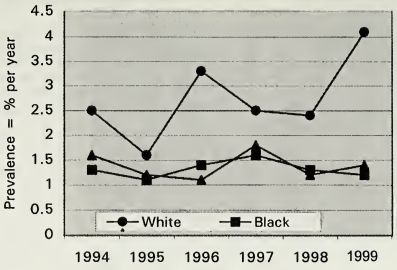


Note: No information available for MSM IDU and Het IDU categories.

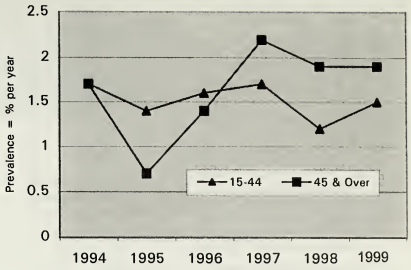
Source: California Department of Health Services, Office of AIDS.

Figure 9. Temporal Trends in HIV Seroprevalence among STD Clinic Patients in Los Angeles Region, 1994 - 1999

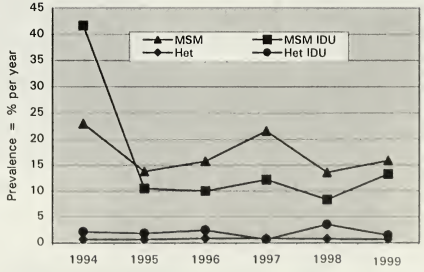
Race/Ethnicity



Age Group



Risk Behavior

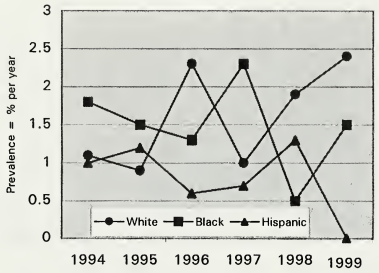


Note: For years 1995 through 1998, there were less than 100 tested and less than or equal to 3 positive test results for MSM IDU category.

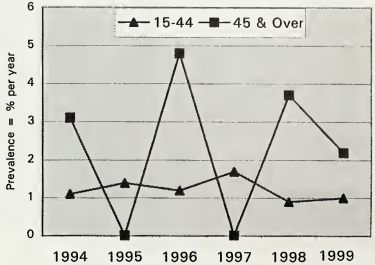
Source: California Department of Health Services, Office of AIDS.

Figure 10. Temporal Trends in HIV Seroprevalence among STD Clinic Patients in Central Coast Region, 1994 - 1999

Race/Ethnicity

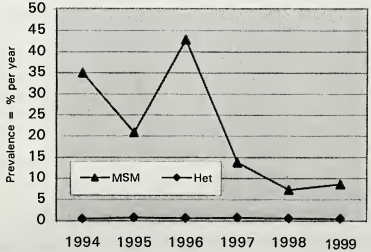


Age Group



Note: For years 1994 through 1999 there were less than 100 tested and less than or equal to 3 positives test results for age group 45 & Over.

Risk Behavior

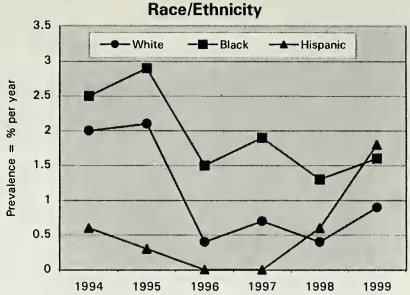


Note: For years 1998 and 1999, there were less than 100 tested and less than or equal to 3 positive test results for MSM category. Risk categories MSM IDU and Het IDU had small numbers and were not included.

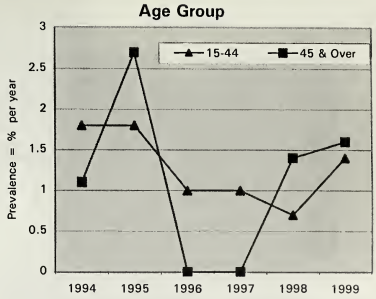
Source: California Department of Health Services, Office of AIDS.

Note: Central Coast includes Long Beach and San Luis Obispo. 1998 and 1999 data included Long Beach only. Data were collected for 6 months of each year for all categories.

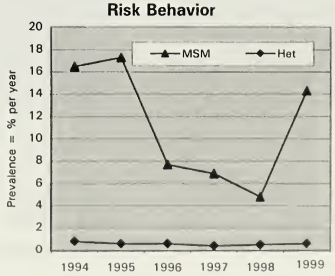
Figure 11. Temporal Trends in HIV Seroprevalence among STD Clinic Patients in Bay Area Region, 1994 - 1999



Note: For year 1996 there were less than 100 tested and less than or equal to 3 positives for Hispanic race category.



Note: For years 1996 through 1999 there were less than 100 tested and less than or equal to 3 positives test results for age group 45 & Over.



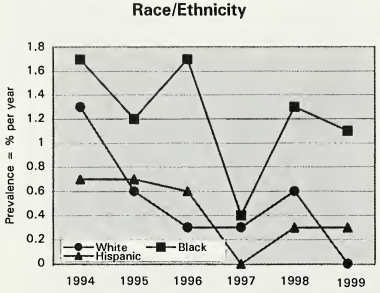
Note: Risk category MSM IDU and Het IDU had small numbers and were not included. For years 1996 and 1998 there were less than 100 tested and less than or equal to 3 positives test results for MSM category.

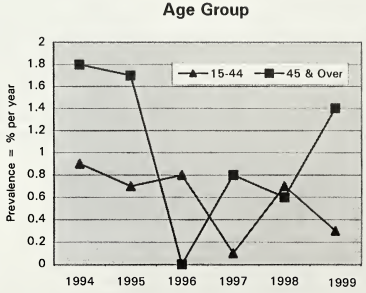
Source: California Department of Health Services, Office of AIDS.

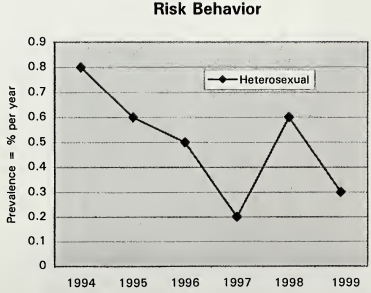
Note: Bay Area includes City of Berkeley and Santa Clara. For years 1994 through 1996, data were collected for 12 months, for years 1997 through 1999, data were collected for 6 months only. For year 1996, only City of Berkeley reported.

California Department of Health Services
Office of AIDS, 2001

Figure 12. Temporal Trends in HIV Seroprevalence among STD Clinic Patients in Central Valley Region, 1994 - 1999





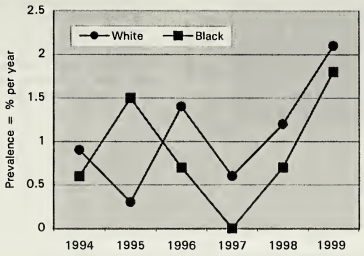


Note: Central Valley includes Fresno, Kern, and San Joaquin counties. Specimens were collected for 6 months only. Risk categories MSM, Het IDU and MSM IDU had small numbers and were not included.

Source: California Department of Health Services, Office of AIDS.

Figure 13. Temporal Trends in HIV Seroprevalence among STD Clinic Patients in North Valley Region, 1994 - 1999

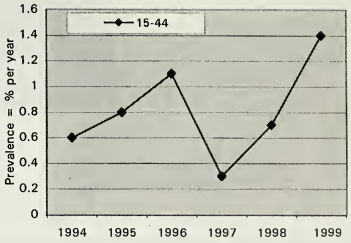
Race/Ethnicity



Note: Hispanics were not included because of zero positives for years 1994-1999.

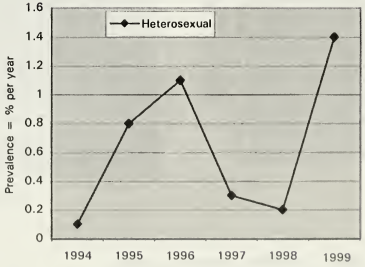
Source: California Department of Health Services, Office of AIDS.

Age Group



Note: Age group 45 & Over were not included because of small numbers tested and zero positives for years 1994-1999.

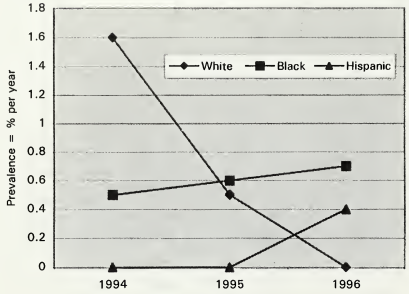
Risk Behavior



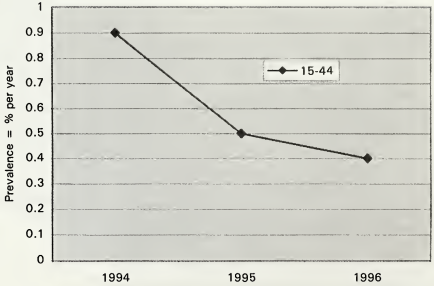
Note: North Valley included Sacramento and Solano for 1994 and 1995. For years 1996 through 1999, North Valley included Sacramento only. Specimens were collected for six months only. Risk categories MSM, Het IDU and MSM IDU had small numbers and were not included.

Figure 14. Temporal Trends in HIV Seroprevalence among STD Clinic Patients in South Valley Region, 1994 - 1996

Race/Ethnicity

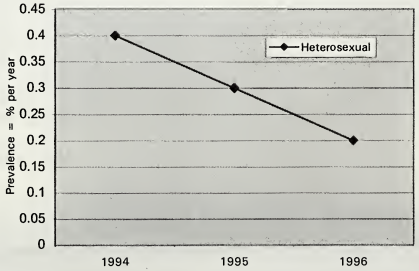


Age Group



Note: Age group 45 & Over was omitted because of zero positives for 1994-1996.

Risk Behavior



Note: South Valley included San Bernardino and Riverside for years 1994 through 1996. Years 1997 through 1999 were omitted for all categories because South Valley included San Bernardino only. Specimens were collected for 6 months only. Risk categories MSM, Het IDU, and MSM IDU had small numbers and were not included.

Source: California Department of Health Services, Office of AIDS.

BLOOD BANKS
AND PLASMA CENTERS

SURVEY AMONG BLOOD BANKS AND PLASMA CENTERS

The California Department of Health Services, Office of AIDS (CDHS/OA), began monitoring data from the routine testing of blood donors in 1987. HIV prevalences among donors are lower than those of the general population because persons at increased risk for HIV infection are actively discouraged from donating.

This report summarizes data from HIV-1 antibody screening of blood and blood products collected in selected California counties and cities for 1999. Additional county data are available through the Office of AIDS. CDHS/OA received reports of testing results from 40 blood banks and 10 plasma centers. This information represents data from California facilities required to report HIV-1/HIV-2[1] antibody test results to CDHS/OA. HIV-2 data are not included in this report.

In 1999, 721,055 specimens from selected California blood banks[2] were tested, of which 19 (0.003 percent) were seropositive. HIV seroprevalence in selected California blood banks ranged from zero to 0.005 percent (Table 23).

In 1999, 637,908 specimens from selected California plasma centers[3] were tested, of which 47 (0.007 percent) were seropositive (Table 24). HIV seroprevalence in selected California plasma centers ranged from zero to 0.013 percent.

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[1]Testing for HIV-2 began the second quarter of 1992. Data collected through 1999 showed 25 (23 Blood Banks, 2 Plasma Centers) confirmed positive for HIV-2. To date, the U.S. Food and Drug Administration has not licensed a confirmatory test for HIV-2 infection. Currently, reactive HIV-2 EIAs are confirmed by unlicensed tests. Cross-reactivity between HIV-1 and HIV-2 is a strong possibility in instances where HIV-2 is confirmed by existing unlicensed testing.

[2]Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, Santa Clara and the Cities of Long Beach and Pasadena.

[3]Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Joaquin, and the City of Long Beach.

Table 23.
HIV-1 Seroprevalence for Units Collected by Selected California Blood Banks
1999

County/City of Residence	Number Tested	Number Positive[1]	Prevalence (%)
Fresno	48,304	2	0.004
Kern	27,645	0	0.000
Long Beach	1,054	0	0.000
Los Angeles	389,621	13	0.003
Pasadena	726	0	0.000
Sacramento	133,768	1	0.001
San Diego	56,187	3	0.005
San Francisco	4,228	0	0.000
San Joaquin	39,272	0	0.000
Santa Clara	20,250	0	0.000
Total	721,055	19	0.003

[1] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot (Wb) or Immunofluorencence Assay (IFA).

Source: California Department of Health Services, Office of AIDS.

Table 24.
HIV-1 Seroprevalence for Units Collected by Selected California Plasma Centers 1999

County/City of Residence	Number Tested	Number Positive[1]	Prevalence (%)
Fresno	78,119	4	0.005
Kern	78,118	2	0.003
Long Beach	53,499	6	0.011
Los Angeles	138,384	18	0.013
Sacramento	56,851	3	0.005
San Bernardino	49,368	5	0.010
San Diego	177,216	8	0.005
San Joaquin	6,353	1	0.016
Total	637,908	47	0.007

[1] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot (Wb) or Immunofluorencence Assay (IFA).

Source: California Department of Health Services, Office of AIDS.

CIVILIAN APPLICANTS FOR MILITARY SERVICE

SURVEY AMONG CIVILIAN APPLICANTS FOR MILITARY SERVICE

Since October 1985, all persons applying for active duty or reserve military service, the service academies, and the Reserve Officer Training Corps (ROTC) have been screened for HIV infection as part of their entrance medical evaluation. Applicants found to be HIV positive are excluded from military service but receive counseling from a military physician and referrals to HIV/AIDS specialists and counselors in their own communities. Data from this group are important because of the large number of persons screened and because the applicants include both sexes and all racial and ethnic groups from all areas of the country. The Department of Defense shares the resulting statistical data with the Centers for Disease Control and Prevention (CDC) for HIV surveillance purposes. The CDC in turn provides this information (excluding personal identifiers) to state and local health departments.

Prior to July 1993, before medical evaluations, applicants were interviewed about drug use and homosexual activity, both of which were grounds for exclusion from entry into military service. Potential applicants were informed that they would be screened for HIV antibodies and excluded from entry if infected. Therefore, injecting drug users, men who have sex with men, and persons who suspected or were already aware they were infected with HIV were likely to have been under represented among those applicants actually tested. In 1993, President Clinton authorized the "don't ask, don't tell policy" and applicants could no longer be asked about homosexual activity.

This report summarizes data for nine selected California counties[1] that also collect STD data. Additional county data are available through the Office of AIDS. In 1999, a total of 19,049 specimens from these selected counties were tested for HIV antibodies (Table 25). Of these, 0.03 percent were seropositive. Prevalence ranged from zero positives in five counties to a high of 0.37 percent in San Francisco county.

As shown in Table 26, males represented 80.7 percent (15,370) of the total civilian applicants for these counties, of which four (0.03 percent) were seropositive. Females represented 19.3 percent (3,679) of the total civilian applicants for these counties, of which one (0.03 percent) was seropositive (Table 27).

In 1999, men in age group 25-29 showed the highest prevalence of 0.08 percent. The one positive among women was in age group 15-19 with a prevalence of 0.04 percent.

Among race/ethnicity groups, Black men had the highest prevalence of 0.10 percent and Black women had one positive (0.14 percent).

[1] Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, and Santa Clara.

Table 25.
HIV Seroprevalence for Civilian Applicants for Military Service
Selected California Counties[1]
1999

County/City of Residence	Number Tested	Number Positive[2]	Prevalence (%)
Fresno	799	0	0.00
Kern	901	0	0.00
Los Angeles	7,914	0	0.00
Sacramento	1,600	1	0.06
San Bernardino	2,258	1	0.04
San Diego	3,755	2	0.05
San Francisco	269	1	0.37
San Joaquin	613	0	0.00
Santa Clara	940	0	0.00
Total	19,049	5	0.03

[1] Data provided by Centers for Disease Control and Prevention, National Center for HIV/STD/TB Prevention, Division of HIV/AIDS Prevention, Civilian Applicants for Military Service.

[2] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot (Wb) or Immunofluorencence Assay (IFA).

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.

Table 26.
HIV Seroprevalence for Male Civilian Applicants For Military Service By Age Group and Race/Ethnicity Selected California Counties[1]
1999

Gender and Age Group	Number Tested	Number Positive[2]	Prevalence %
Age Group			
Under 15	0	0	a
15-19	8,955	1	0.01
20-24	3,995	2	0.05
25-29	1,324	1	0.08
30-34	650	0	0.00
35-39	268	0	0.00
40-44	107	0	0.00
45 and Over	71	0	a
Race/Ethnicity			
White	6,572	1	0.02
Black	1,948	2	0.10
Hispanic	4,317	0	0.00
Asian/Pacific Islander	2,007	1	0.05
American Indian/Alaskan Native	222	0	0.00
None of the Above	304	0	0.00
Total	15,370	4	0.03

[1] Data provided by Centers for Disease Control and Prevention, National Center for HIV/STD/TB Prevention, Division of HIV/AIDS Prevention, Civilian Applicants for Military Service.

[2] All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot (Wb) or Immunofluorencence Assay (IFA).

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.

Table 27.
HIV Seroprevalence for Female Civilian Applicants For Military Service By Age Group and Race/Ethnicity Selected California Counties[1]
1999

Gender and Age Group	Number Tested	Number Positive[2]	Prevalence %
Age Group			
Under 15	0	0	a
15-19	2,311	1	0.04
20-24	903	0	0.00
25-29	275	0	0.00
30-34	136	0	0.00
35-39	36	0	a
40-44	14	0	a
45 and Over	b	0	a
Race/Ethnicity			
White	1,363	0	0.00
Black	737	1	0.14
Hispanic	1,010	0	0.00
Asian/Pacific Islander	435	0	0.00
American Indian/Alaskan Native	61	0	a
None of the Above	73	0	a
Total	3,679	1	0.03

1 Data provided by Centers for Disease Control and Prevention, National Center for HIV/STD/TB Prevention, Division of HIV/AIDS Prevention, Civilian Applicants for Military Service.

2 All positive specimens were repeatedly reactive by Enzyme-linked Immunosorbent Assay (ELISA) and confirmed by a Western blot (Wb) or Immunofluorencence Assay (IFA).

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

[b] Less than 5.

Source: California Department of Health Services, Office of AIDS.

SURVEY OF CHILDBEARING WOMEN

SURVEY OF CHILDBEARING WOMEN

From 1988 through 1995, an anonymous national HIV serosurvey – the Survey of Childbearing Women – was conducted to monitor prevalence of HIV infection among women delivering infants in the United States. The survey was based on the systematic, unlinked testing for HIV antibody with residual dried blood spot specimens routinely collected from newborns for routine metabolic screening.

CDHS/OA in collaboration with the Genetic Disease Branch (GDB) and the Viral and Rickettsial Disease Laboratory (VRDL), participated in this national serosurvey from 1988 through 1995. OA collected data on consecutive births during the third quarter (July, August, and September) of each year. In 1998, OA, in collaboration with GDB and VRDL, replicated the serosurvey. In addition, the Centers for Disease Control and Prevention (CDC) measured zidovudine in HIV antibody-positive specimens to assess the prevalence of zidovudine therapy among HIV-infected childbearing women. These population-based data are important to target resources in a cost-beneficial manner and to enhance HIV counseling and testing strategies among pregnant women.

This report includes HIV seroprevalence for childbearing women in selected California counties and cities[1]. During 1998, 76,166 unlinked specimens were tested for maternal HIV antibodies in these counties. Of these, 60 specimens were confirmed positive. The seroprevalence for childbearing women in selected California counties was 0.08 percent (eight per 10,000). County-specific seroprevalence ranged from zero positives in Santa Clara county and the City of Berkeley to a high of 0.26 percent in the City and County of San Francisco. Overall, among selected counties the prevalence of zidovudine therapy among HIV infected childbearing was 78.3% (47/60). Additional county data are available in California Childbearing Women: A Comparison of HIV Seroprevalence Data from the Third Quarters of 1992, 1995, and 1998 and Zidovudine Determination, 1998.

In 1998, age-specific HIV seroprevalences were highest among women in age groups 25-29 and 35 and Over. Women aged 19 and Under and "Unknown" had zero positives.

During the third quarter of 1998, among selected California counties and cities, Hispanic childbearing women accounted for the largest numbers of births (41,389). However, race-specific seroprevalences reveal substantially higher HIV seroprevalence among Black women. In 1998, seroprevalences were five times higher among Black women compared with White women, and eight times higher than Hispanic women.

[1] Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, Santa Clara, cities of Long Beach and Berkeley.

Table 28.
HIV Seroprevalence in California Childbearing Women[1]
Selected California Counties and Cities
1998

County/City of Residence	Number Tested	Number Positive[2]	Prevalence (%)
Fresno	3,340	3	0.09
Kern	2,897	4	0.14
Los Angeles	37,588	26	0.07
Sacramento	3,904	4	0.10
San Bernardino	6,588	7	0.11
San Diego	8,909	5	0.06
San Francisco	1,907	5	0.26
San Joaquin	2,180	3	0.14
Santa Clara	6,142	0	0.00
Long Beach	2,415	3	0.12
Berkeley	296	0	0.00
Total	76,166	60	0.08

[1] Residual dried-blood specimens collected by heel stick onto filter paper for newborn metabolic screening were tested for HIV antibody only in the third quarter of the year.

[2] All positive specimens were tested for HIV antibody by enzyme immunoassay and confirmed by Western blot.

Source: California Department of Health Services, Office of AIDS.

Table 29.
HIV Seroprevalence in California Childbearing Women[1] By Age Group and Race/Ethnicity of Mother Selected California Counties and Cities[2] 1998

Age Group Race/Ethnicity	Number Tested	Number Positive	Prevalence (%)
Age Group			
19 and Under	8,985	0	0.00
20-24	18,025	10	0.06
25-29	20,495	23	0.11
30-34	17,327	13	0.08
35 and Over	11,322	14	0.12
Unknown	12	0	[a]
Race/Ethnicity			
White	19,431	15	0.08
Black	5,984	23	0.38
Hispanic	41,389	19	0.05
Asian/Pacific Islander	5,812	0	0.00
Other	3,537	3	0.08
Unknown	13	0	[a]

[1] Residual dried-blood specimens collected by heel stick onto filter paper for newborn metabolic screening were tested for HIV antibody only in the third quarter of the year.

[2] Includes Fresno, Kern, Los Angeles, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, and Santa Clara counties, and the cities of Long Beach and Berkeley.

[a] Not calculated for fewer than 100 tested and number positive less than or equal to 3.

Source: California Department of Health Services, Office of AIDS.